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# FEE TRANSMITTAL

		<b>Complete if Known</b>	
		Application Number	09/690,046-Conf. #1525
		Filing Date	October 16, 2000
		First Named Inventor	Frederick S.M. Herz
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	E. W. Shepperd
		Art Unit	2492
TOTAL AMOUNT OF PAYMENT		(\$)	1,345.00
		Attorney Docket No.	
P0813.70015US01			

**METHOD OF PAYMENT** (check all that apply)

<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account	<input type="checkbox"/> Deposit Account Number: 23/2825			Deposit Account Name: Wolf, Greenfield & Sacks, P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEES CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>	
	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>
Utility	380	190	620	310	250	125
Design	250	125	120	60	160	80
Plant	250	125	380	190	200	100
Reissue	380	190	620	310	750	375
Provisional	250	125	0	0	0	0

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues) **Fee (\$)** 60 30  
 Each independent claim over 3 (including Reissues) **Fee (\$)** 250 125  
 Multiple dependent claims **Fee (\$)** 450 225

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Small Entity</b>
3	- 20 or HP	x	=	<b>Fee (\$)</b> <b>Fee (\$)</b>

HP = highest number of total claims paid for, if greater than 20.

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>
3 or HP	x	=		<b>Fee (\$)</b> <b>Fee Paid (\$)</b>

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

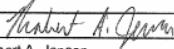
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$310 (\$155 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____	- 100 =	/50 =	(round up to a whole number) x	=

<b>Fees Paid (\$)</b>
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Non-English Specification, \$130 fee (small entity discount)	<b>Fees Paid (\$)</b>
Other (e.g., late filing surcharge): 2255 Extension for response within fifth month	1,345.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	61,146	Telephone	617.646.8000
Name (Print/Type)	Robert A. Jensen	Date	March 23, 2012		

**Certificate of Electronic Filing Under 37 CFR 1.8**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with 37 CFR § 1.8(a)(4).

Dated: March 23, 2012

